PTO/SB/05 (08-03)
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UTILITY PATENT APPLICATION **TRANSMITTAL**

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No.	NC-10002	
First Inventor	FYFE, Matthew Colin Thor	8
Title	TRI CYCLO SUBSTITUTED AMI	222
Express Mail Label No.	ER 013886751	

APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents.	ADDRESS TO: Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria VA 22313-1450							
1.	7. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) 8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. Computer Readable Form (CRF) b. Specification Sequence Listing on: i. CD-ROM or CD-R (2 copies); or ii. Paper c. Statements verifying identity of above copies ACCOMPANYING APPLICATION PARTS 9. Assignment Papers (cover sheet & document(s)) 10. 37 CFR 3.73(b) Statement Power of (when there is an assignee) Attorney 11. English Translation Document (if applicable) 12. Information Disclosure Copies of IDS Statement (IDS)/PTO-1449 Citations 13. Preliminary Amendment 14. Return Receipt Postcard (MPEP 503) (Should be specifically itemized) 15. Certified Copy of Priority Document(s) (if foreign priority is claimed) 16. Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.							
18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the								
specification following the title, or in an Application Data Sheet under 37 CFR 1.76:								
Continuation Divisional Continuat	ion-in-part (CIP) of prior application No.:							
Prior application information: Examiner For CONTINUATION OF DIVISIONAL APPS only; The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.								
19. CORRESPONDENCE ADDRESS								
Customer Number: 38724	OR Correspondence address below							
Name								
Address								
City	State Zip Code							
Country Te	lephone Fax							
Name (Print/Type) Shu M. Lee Registration No. (Attorney/Agent) 41147								
Signature Shu M. La	Date , 2004							

This collection of information is required by 37 CFR 1.53(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mall Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PTO/SB/17 (10-03)
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FEE TRANSMITTA		Complete if Known							
_ :	-	Application Numb			ber				
for FY 2004		Filing Date		Feb	February 10, 2004				
Effective 10/01/2003. Patent fees are subject to annual revi	sion.	First Named Inventor			entor FY	FE			
Applicant claims small entity status. See 37 CFR 1.3		Examiner Name							
TOTAL AMOUNT OF PAYMENT (\$) \$1007		Art Unit							
		00 Attorney Docket No. NC-10002							
METHOD OF PAYMENT (check all that apply)		FEE CALCULATION (continued)							
Check Credit card Mone Other None		3. ADDITIONAL FEES							
Deposit	Fee	Entity Fee	Sma Fee	Fee	Fe	•		Fee Paid	
Deposit Account 50-2783	Code 1051		2051	(\$) 65	Surcharge - la	-	or oath	ree Palo	
Number 30-2783		50	2052	25	-	-	al filing fee or cover	-	
OSI Pharmaceuticals, Inc.	1053	130	1053	130	sheet Non - English	specification	n		
The Director is authorized to: (check all that apply)	1812	2,520	1812	2,520	For filing a re	quest for ex	parte reexamination		
Charge fee(s) indicated below Credit any overpayments	1804	920*	1804	920*	Requesting p				
Charge any additional fee(s) or any underpayment of fee(s)	1805	1,840*	18051	,840*			SIR after Examiner		
Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.	1251	110	2251	55	Extension for	reply within	first month		
FEE CALCULATION	1252	420	2252	210	Extension for	reply within	second month		
1. BASIC FILING FEE	1253	950	2253	475	Extension for	reply within	third month		
Large Entity Small Entity	1254	1,480	2254	740	Extension for	reply within	fourth month		
Fee Fed Fee Fee Code (\$) Code (\$) Fee Paid	1255	2,010	2255	1,005	Extension for	reply within	fifth month		
1001 770 2001 385 Utility filing 770.00	1401	330	2401	165	Notice of App	eal			
1002 340 2002 170 Design filing	1402	330	2402	165	Filing a brief i	n support of	an appeal		
1003 530 2003 265 Plant filing	1403	290	2403	145	Request for o	ral hearing			
1004 770 2004 385 Reissue filing	1451	1,510	1451	1,510	Petition to ins	titute a public	c use proceeding		
1005 160 2005 80 Provisional filing fee	1452		2452	55	Petition to rev				
SUBTOTAL (1) (\$) \$770.00		1,330	2453	665	Petition to rev				
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE		1,330	2501	665	Utility issue for	. •	e)		
Fee from Extra Claims below Fee Paid	1502		2502	240	Design issue				
Total Claims 26 -20** = 6 X 18.00 = 108.00	1503 1460	640 130	2503 1460	320 130	Plant issue fe Petitions to th		nor.		
Independent 6 - 3** = 3 X 43.00 = 129.00	1807	50	1807	50	Processing fe				
Multiple Dependent = 237.0	1806	180	1806	180	Submission of				
Large Entity Fee Fee Fee Fee Fee Description Code (\$) Code (\$)	8021	40	8021		Statement Recording each				
1202 18 2202 9 Claims in excess of 20	1809	770	2809	385	property (time Filing a submi	ssion after fi			
1201 86 2201 43 Independent claims in excess of 3 1203 290 2203 145 Multiple dependent claim if not paid	1810	770	2810	385	(37 CFR § 1 For each addit		on to be examined		
1203 290 2203 145 Multiple dependent claim, if not paid 1204 86 2204 ** Reissue independent claims	1801	770	2801		(37 CFR § 1	.129(b))	amination (RCE)		
over original patent	1802		1802		Request for e				
1205 18 2205 9 ** Reissue claims in excess of 20 and over original patent	1				of a design ap	plication			
	Oth	Other fee						L	
SUBTOTAL (2) (\$) \$1007.00									
**or number previously paid, if greater; For Reissues, see above *Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$)									
SUBMITTED BY Complete (if applicable)									
Name (Print/Type) Shu M. Lee		Registration No. (Attorney/Agent)		41147	Telephone	elephone (631)962-2056			
Signature ShuM. Lee						Date	January 6, 20	04	

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